

Bill Code 6325-38-P

## OFFICE OF PERSONNEL MANAGEMENT

Submission for Review: Disabled Dependent Questionnaire, RI 30-10

**AGENCY:** Office of Personnel Management.

**ACTION:** 60-Day Notice and request for comments.

**SUMMARY:** The Retirement Services, Office of Personnel Management (OPM) offers the general public and other federal agencies the opportunity to comment on an extension without change of a currently approved information collection (ICR), Disabled Dependent Questionnaire, RI 30-10.

**DATES:** Comments are encouraged and will be accepted until [INSERT DATE 60 DAYS AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER].

**ADDRESSES:** Interested persons are invited to submit written comments on the proposed information collection to Retirement Services, U.S. Office of Personnel Management, 1900 E Street, NW, Washington, DC 20415, Attention: Alberta Butler, Room 2347-E, or sent via electronic mail to *Alberta.Butler@opm.gov*.

**FOR FURTHER INFORMATION CONTACT:** A copy of this ICR with applicable supporting documentation, may be obtained by contacting the Retirement Services Publications Team, Office of Personnel Management, 1900 E Street, NW, Room 3316-L, Washington, DC 20415, Attention: Cyrus S. Benson, or sent via electronic mail to *Cyrus.Benson@opm.gov* or faxed to (202) 606-0910.

## SUPPLEMENTARY INFORMATION:

As required by the Paperwork Reduction Act of 1995 (Public Law 104-13, 44 U.S.C. chapter 35) as amended by the Clinger-Cohen Act (Pub. L. 104-106), OPM is soliciting comments for this

collection (OMB No. 3206-0179). The Office of Management and Budget is particularly

interested in comments that:

1. Evaluate whether the proposed collection of information is necessary for the proper

performance of functions of the agency, including whether the information will have practical

utility;

2. Evaluate the accuracy of the agency's estimate of the burden of the proposed

collection of information, including the validity of the methodology and assumptions used;

3. Enhance the quality, utility, and clarity of the information to be collected; and

4. Minimize the burden of the collection of information on those who are to respond,

including through the use of appropriate automated, electronic, mechanical, or other

technological collection techniques or other forms of information technology, e.g., permitting

electronic submissions of responses.

Form RI 30-10 is used to collect sufficient information about the medical condition and

earning capacity for the Office of Personnel Management to be able to determine whether a

disabled adult child is eligible for health benefits coverage and/or survivor annuity payments

under the Civil Service Retirement System or the Federal Employees Retirement System.

**Analysis:** 

Agency: Retirement Operations, Retirement Services, Office of Personnel Management

Title: Disabled Dependent Questionnaire

*OMB Number:* 3206-0179

Frequency: On occasion

Affected Public: Individuals or Households

*Number of Respondents*: 2,500

Estimated Time Per Respondent: 1 hour

Total Burden Hours: 2,500

U.S. Office of Personnel Management.

## Kathleen M. McGettigan,

Acting Director.

Billing Code 6325-38-P

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